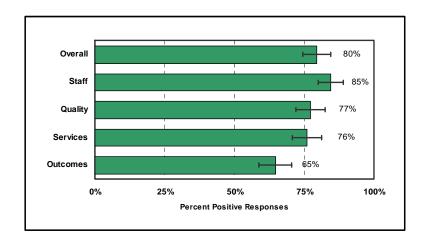
Vermont Department of Mental Health

Evaluation of Child and Adolescent Mental Health Programs

By Young People Served in Vermont September - December 2010

TECHNICAL REPORT Executive Summary



Sheila Leno, MS John Pandiani, PhD

Mental Health Research and Statistics Vermont Department of Mental Health 26 Terrace St. Montpelier, VT 05609

December 2011

The authors of this report thank all those who contributed to this project. This work could not have been completed without the help of the staff of the Child, Adolescent and Family Unit of the Department of Mental Health, especially Alice Maynard, Quality Management Chief, and Jessica Whitaker, Administrative Assistant. The authors would also like to thank the young consumers who took the time to evaluate and comment on the child and adolescent mental health programs provided by the community mental health centers in Vermont.

EXECUTIVE SUMMARY

CONSUMER EVALUATION CHILD AND ADOLESCENT MENTAL HEALTH PROGRAMS IN VERMONT

The 2011 survey of young people served by child and adolescent public mental health programs in Vermont is one part of a larger effort by the Department of Mental Health's Child, Adolescent and Family Unit. That effort monitors the performance of community mental health programs from the perspective of people who receive services and other stakeholders. This survey is the fifth evaluation by adolescent consumers of youth and family services provided by community mental health centers in Vermont. Similar surveys of adolescents were done in 1999, 2003, 2007 and 2009.

These youth evaluations are used along with those of other stakeholders and with other measures of program performance from existing databases. The goal is to provide a more complete picture of the performance of local community mental health programs. The combined results of these evaluations allow consumers and stakeholders an ongoing opportunity to:

- compare the performance of community-based mental health programs in Vermont, and
- support local programs in their quality improvement process.

The results of this survey should be considered in light of previous consumer and stakeholder evaluations. These results should also be considered in light of measures of levels of access to care, service delivery patterns, service system integration, and treatment outcomes that are based on analyses of existing databases. Many of these indicators are published in the annual Department of Mental Health (DMH) Statistical Reports and weekly Performance Indicator Project (PIP) data reports. They are available online at http://mentalhealth.vermont.gov/report.

This approach to program evaluation assumes that program performance is multidimensional and is best understood on the basis of a variety of indicators that focus on different aspects of program performance. This report focuses on one very important aspect: the subjective evaluations of young people who were served by those programs.

Methodology

During the spring of 2011, the Child, Adolescent and Family Unit of the Vermont Department of Mental Health invited young people to evaluate child and adolescent mental health programs in Vermont's ten regional community mental health centers (CMHCs) and one state-wide specialized service agency. All young people aged 14 -18 who received six or more Medicaid-reimbursed services from these centers during the period September through December of 2010 were sent questionnaires that asked for their opinion of various aspects of these services. In total, 259 (20%) of the potential pool of 1,281 deliverable surveys were completed, returned and included in the analyses.

The youth survey consists of thirty-one fixed-alternative items and four open-ended questions designed to provide information that would help stakeholders to compare the performance of child and adolescent mental health programs in Vermont. The survey included most items on the Mental Health Statistics Improvement Program (MHSIP) Consumer Survey developed by a multi-state work group; further items were added as a result of input from Vermont stakeholders.

To help compare Vermont's ten child and adolescent mental health programs and one state-wide specialized service agency, young consumers' responses to thirty-one fixed-alternative items were combined into five scales. These scales focus on *Overall* consumer evaluation of program

performance, and evaluation of program performance with regard to Staff, Quality, Services, and Outcomes.

Additional comments about program performance were offered by 69% of respondents. These written comments were reviewed by Department of Mental Health staff, and were coded into positive and negative categories for analysis in this report.

Overall Results

The young people served by child and adolescent mental health programs in Vermont rated their programs favorably in 2011. Statewide, on the *Overall* measure of program performance, 80% of the youth evaluated the programs positively. Some aspects of program performance, however, were rated more favorably than others. Fixed-alternative items related to *Staff* received the most favorable responses (85% favorable), followed by *Quality* (77% favorable) and *Services* (76% favorable). Items related to *Outcomes* (65% favorable) received the lowest ratings.

There has been fairly consistant improvement in ratings of child and adolescent services by youth from 1999 to 2011 (see Figure 1). The ratings for *Overall* program performance increased from 66% in 1999 to 80% in 2011, and the ratings for *Staff* increased from 70% to 85% during this time period. Ratings for *Quality* increased from 65% to 77% and the ratings for *Services* increased from 55% to 76%. Ratings for *Outcomes* increased from 59% to 65% during the period covered by these surveys. In all but one year, *Outcomes* received the lowest ratings given by young consumers.

In total, 69% of the survey respondents made written comments about the helpfulness of the services they received. Of the total number of comments received, 59% were positive. Every agency received more positive than negative comments.

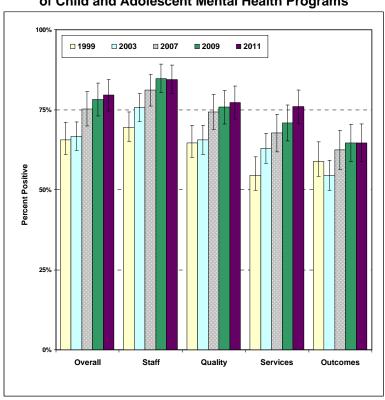


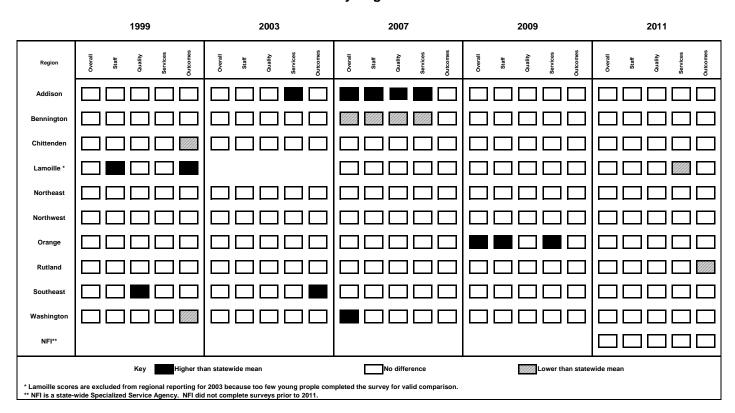
Figure 1. Comparative Positive Evaluations by Youth of Child and Adolescent Mental Health Programs

Differences among Programs

Ratings of individual programs on each of five composite scales were compared to the statewide mean for each scale. Regionally, there are few differences in evaluations of the child and adolescent community mental health programs during the time period covered by these surveys (see Figure 2). Most scale scores received by the CMHCs are not significantly different from the statewide average. In 2011, however, two CMHC programs were rated significantly lower than the statewide average on one of five scales.

In 2011, the child and adolescent mental health program for Lamoille Community Connections (Lamoille) was rated lower than the statewide mean score on one of the five scales: *Services*. The child and adolescent mental health program for Rutland Mental Health Services (Rutland) was also rated lower than the statewide mean score on one of the five scales: *Outcomes*. Young consumers' evaluations of the other nine programs were not statistically different from the statewide average rating on any scale.

Figure 2. Comparative Positive Evaluations by Youth of Child and Adolescent Mental Health Programs by Region



Youth Survey 2011 Positive Responses to Individual Items by Region

	04-4-			_		O IIIUIVI		_			Wth	
 Number Respo		Addison	Bennington	Chittenden	Lamoille	Northeast	Northwest	Orange	Rutland	Southeast	Washington	NFI
umber kespo	259	16	12	57	9	22	18	22	23	37	27	16
taff spoke wit	h me in a way	that I unde	erstood.									
•	88%	88%	92%	82%	78%	91%	94%	91%	87%	89%	85%	94%
taff treated m	-											
aff respected	88% mv family's	100% religious/sn	92% iritual beliefs.	84%	67%	95%	100%	91%	87%	84%	81%	88%
un respected	85%	100%	100%	91%	78%	86%	67%	82%	81%	83%	81%	87%
liked the staff	people who	worked with	me at [agenc	:y].								
	85%	88%	100%	80%	78%	91%	94%	91%	78%	81%	81%	88%
arr were sens	85%	100%	ic background 91%	a. 88%	78%	82%	72%	90%	80%	78%	78%	100%
taff respected				nation about r								
	84%	94%	92%	82%	44%	95%	78%	86%	78%	84%	85%	88%
he location of	my mental h 83%	ealth servic 94%	es was conve 83%	nient. 84%	67%	95%	72%	91%	78%	76%	85%	81%
ne services I i				o4% of good qualit		95%	1270	91%	7070	70%	03%	0176
	83%	81%	83%	88%	56%	82%	78%	91%	73%	84%	85%	81%
eople helping												
ha sarvicas I i	82%	81%	92% vere helpful to	82%	67%	86%	89%	76%	73%	86%	81%	88%
ne del video i i	81%	88%	92%	84%	67%	82%	78%	86%	70%	81%	81%	81%
ervices were a	vailable at ti	mes conver	nient for me.									
	80%	88%	83%	84%	44%	82%	72%	90%	70%	81%	89%	69%
he staff listen	ea to wnat i r 80%	94%	92%	77%	67%	82%	78%	86%	74%	78%	81%	81%
he staff asked				,0	0.70	0270	1070	0070		. 070	0.70	0.70
	80%	94%	75%	82%	56%	82%	72%	77%	78%	83%	78%	81%
verall, I am sa				000/	500/	000/	700/	770/	700/	040/	040/	040/
participated in	79% mv own trea	81% atment.	83%	82%	56%	82%	78%	77%	70%	81%	81%	81%
,	78%	88%	92%	73%	56%	77%	89%	82%	74%	80%	78%	75%
felt I had som												
would recomm	76% nend this me	81% ntal health i	75%	80% and who need	22%	77%	83%	77%	64%	81%	85%	75%
would reconni	76%	88%	91%	84%	56%	73%	72%	67%	64%	81%	69%	69%
received servi	ces that were	right for m	e.									
	75%	81%	83%	77%	22%	82%	78%	77%	52%	81%	81%	75%
helped to cho	ose my treati 75%	nent goals. 88%	82%	72%	22%	68%	78%	77%	74%	77%	76%	94%
he staff knew			0270	1270	2270	0070	7070	7770	1470	7770	1070	5470
	75%	75%	83%	79%	44%	82%	67%	82%	68%	73%	74%	75%
got the help I		000/	000/	700/	4.407	700/	700/	740/	000/	700/	700/	000/
I needed men	73% tal health se	88% vices in the	83% e future. I wou	70% Id use this me	44% ental health c	73% enter again.	78%	71%	62%	76%	78%	69%
	72%	75%	91%	75%	44%	86%	72%	68%	59%	75%	62%	75%
am better at h												
ant along bott	69%	56%	64%	73%	56%	73%	78%	73%	45%	67%	81%	67%
get along bett	67%	69%	82%	68%	44%	73%	67%	82%	55%	57%	78%	63%
am better able												
	67%	63%	64%	70%	44%	65%	83%	77%	55%	69%	69%	50%
am doing bett		and/or at wo 75%	ork. 82%	71%	56%	71%	56%	67%	55%	56%	69%	69%
nelped to cho	66% ose my servi		02 /6	7 1 70	30 /6	7 1 70	30 /6	07 /6	3376	30 /6	0976	0376
•	66%	69%	75%	67%	33%	68%	67%	68%	61%	69%	59%	69%
am satisfied v		-		0071			045:	505 :			705	
got as much h	65% Jeln as I need	56% led	73%	68%	44%	86%	61%	50%	45%	76%	76%	47%
got as much h	64%	81%	58%	65%	22%	73%	61%	64%	45%	67%	85%	56%
get along bett												
	62%	56%	64%	64%	44%	73%	56%	64%	45%	64%	78%	53%
nce starting t		vices, the n 36%	umber of days 55%	s I have been 33%	in school is [29%	'greater]. 45%	24%	20%	16%	27%	36%	50%
	32%	JU /0	JJ /0	JJ /0	23/0	4 J /0	∠4 /0	20 /0	1070	21 /0	30 /0	JU70
verall Mean												
	75%	80%	82%	76%	51%	79%	74%	77%	65%	75%	77%	75%